FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
IFORM LIMITED OFFERING EXEMPTION

1428	586
OMB AP	PROVAL
OMB Number	3235-0076
Expires:	April 30, 2008
Estimated average	ge burden
hours per respon	se16.00
SEC US	E ONLY
Prefix	Serial
DATE RI	ECEIVED
1	1

Name of Offering () Check-if this is an a	amendment and name has changed, and indicate cha	inge.)
My Girlfriend's Boyfriend, LLC - Cla	ass A Units and Class B Units	
Filing Under (Check box(es) that apply):	Rule 504 Rule 505 X Rule 5	06 Section 4(6) ULOE
Type of Filing: X New Filing	ndment	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer		
Name of Issuer	lment and name has changed, and indicate change.)	
My Girlfriend's Boyfriend, LLC		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
561 West 440 North, American Fork, 1	Utah 84003	(801) 647-1842
Address of Principal Business Operations	(Number PROCESSED Zip Code)	Telephone Number (Including Area Code)
(If different from Executive Offices)	FUOUE22ED	
Brief Description of Business Filmmaking	MAR 0 3 2008 / THOMSON FINANCIAL	08041458
Type of Business Organization		
	ited partnership, already formed Officed partnership, to be formed	ther (please specify): Company X
	Month Year	
Actual or Estimated Date of Incorporation or Organ		X Actual
	(Enter two-letter U.S. Postal Service abbreviation for CN for Canada; FN for other foreign jurisdiction)	or State:
GENERAL INSTRUCTIONS		· · · · · · · · · · · · · · · · · · ·

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA		
2. Enter the information requested for the following:		
 Each promoter of the issuer, if the issuer has been organized within the past five years; 		
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10st 		
 Each executive officer and director of corporate issuers and of corporate general and managing pa 	rtners of partnership iss	uers; and
Each general and managing partner of partnership issuers.		_
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	☐ Director	X General and/or Managing Partner
Full Name (Last name first, if individual)		_
Fiftyfilms LLC		
Business or Residence Address (Number and Street, City, State, Zip Code)		
561 West 440 North, American Fork, Utah 84003		
Check Box(es) that Apply: X Promoter X Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Rick McFarland		_
Business or Residence Address (Number and Street, City, State, Zip Code)		
561 West 440 North, American Fork, Utah 84003		
Check Box(es) that Apply: X Promoter X Beneficial Owner Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		
Daryn Tufts		
Business or Residence Address (Number and Street, City, State, Zip Code)		
561 West 440 North, American Fork, Utah 84003		
Check Box(es) that Apply: Promoter X Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Sonja Suarez Carey		
Business or Residence Address (Number and Street, City, State, Zip Code)		
918 Stonehedge Lane, Alpine, Utah 84004		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		_
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		· · · · · · · · · · · · · · · · · · ·
(Use blank sheet, or copy and use additional copies of this sheet,	as necessary)	
2 of 8 B. INFORMATION ABOUT OFFERING		

																							Yes	
1.	Has th	ne issue	r sold	l, or do	es the	issuer	inten	d to sel	ll, to n	on-acc	redited	i invest	tors ir	ı this o	fferi	ng?	•••••	*************					Х	
						Answer	also	in App	endix	, Colur	nn 2, i	f filing	unde	r ULO	E									
2.	2. What is the minimum investment that will be accepted from any individual?									••••	\$		00.00											
3.	Does	the offe	ring p	permit	joint	ownersł	nip o	f a sing	le uni	ı?	•••••		•••••					••••••		•••••	••••		Yes X	No 🗆
	simila an ass broke the in	the information that is the contract of the co	neration persiler. I on for	on for on or f more r that b	solici agent than roker	of a br five (5) or deal	f puro oker pers	chasers or dea ons to l	in co ler reg	nnectio gistered	n with I with	sales the SE	of sec Can	urities d/or w	in th ith a	e offeri state o	ng. I r stat	f a pers es, list	on to the n	be liste ame of	d is the			
Full Nan	ne (La	st name	TIPST,	it ind:	ividua	11)																		
Business	or Re	sidence	Add	ress (N	lumbe	er and S	treet,	City, S	State, 2	Zip Co	de)													
		15			 -																			
Name of	Assoc	ciated B	rokei	or De	aler																			
States in																								
Check "	All St □			k indiv [AZ]	vidual	States) [AR]						[CT]		[DE]		[DC]		[FL]		[GA]		(HI)	All:	States [ID]
(IL)		[1N]		[IA]		[KS]				[LA]		[ME]		[MD]				[MI]		[MN]		[MS]		[MO]
[MT]		[NE]		(NV)		[NH]								[NC]	Ξ	[ND]		[OH]		[OK]		[OR]		[PA]
[RI] 		[SC]		[SD]		[TN]	_			[NM]	_	[NY]	_				_	(WV)	_	[WI]	_	[WY]		[PR]
							<u> </u>	[TX]		[UT]		[VT]		[VA]		{WA}		[wv]		[WI]				[FK]
Full Nam	ie (La:	st name	first,	if indi	ividua	1)																		
Business	or Re	sidence	Add	ress (N	lumbe	er and S	treet,	City, S	State, 2	Zip Co	de)													
Name of	Λεεοι	riated R	rokei	or De	aler																			
vanie or	715500	Jaica 5	TORCI	OI DU	ui (i																			
States in																								
Check "			_		_										_		_							States
] [AL]		[AK]		[AZ]		[AR]		[CA]		[CO]		[CT]	_	[DE]		[DC]		[FL]		[GA]		(HI)	_	(ID)
		[IN]				[KS]		(KY)		[LA]		[ME]		[MD]	_	[MA]		[MI]		[MN]		[MS]		[MO]
[MT]		[NE]		[NV]		[NH]		[NJ]		[NM]		[NY]		[NC]		-		[OH]		[OK]		[OR]		[PA]
[RI]	<u> </u>	[SC]	<u> </u>			[TN]		[TX]		[UT]	<u> </u>	(VT)		[VA]		[WA]	<u> </u>	[WV]	<u>Ц</u>	[WI]		[WY]		[PR]
Full Nam	ie (La	si name	HFSL,	II INQ	ividua	11)																		
Business	or Re	sidence	Add	ress (N	lumbe	er and S	treet,	City, S	State, 2	Zip Co	de)													
Name of	Assoc	iated B	roker	or De	aler																			
States in																								
Check ". [AL]	All St	ates" or [AK]	chec	k indiv [AZ]	/idual □	States) [AR]		[CA]		[CO]		[CT]		[DE]		[DC]		[FL]		[GA]		 [HI]	_	States (ID)
] (IL)		[IN]		[IA]		[KS]		[KY]		[LA]		[ME]		[MD]				[MI]		[MN]		[MS]		[MO]
() [MT]		[NE]		[NV]		[NH]				[NM]		[NY]		[NC]				[OH]		[OK]		[OR]		[PA]
_																					_			
[RI]		[SC]		[SD]		[TN]		[TX]		[UT]		[VT]	Ш	[VA]		[WA]		[WV]		[WI]		[WY]		[PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Amount
	Type of Security	Offering Price	Already Sold
	Debt	\$	
	Equity	\$_1,950,000.00	\$ 25,000.00
	Common X Preferred		
	Convertible Securities (including warrants)	\$	
	Partnership Interests	\$	\$
	Other (Specify	\$	
	Total	\$_1,950,000.00	\$_25,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	0	\$ <u>0.00</u>
	Non-Accredited Investors	1	\$ 25,000.00
	Total (for filings under Rule 504 only)	 	<u> </u>
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amouni
	Type of Offering	Security	Sold
	Rule 505		s
	Regulation A		<u> </u>
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		□ \$
	Legal Fees		X \$ 10,000.00
	Accounting Fees		
	Engineering Fees		□ \$
	Sales Commissions (specify finders' fees separately)		□ \$
	Other Expenses (identify)		□ s

\$ 10,000.00

	C. OFFERING P	RICE, NUMBER OF INVESTORS, E	XPENSES AND	USE OF PROCEEDS			
	b. Enter the difference between the aggr Question 1 and total expenses furnished in the "adjusted gross proceeds to the issuer.".		ifference is			\$	1,940,000.00
5.	Indicate below the amount of the adjusted used for each of the purposes shown. If the estimate and check the box to the left of equal the adjusted gross proceeds to the is above.	e amount for any purpose is not known he estimate. The total of the payments	, furnish an listed must				
				Payment to Officers, Directors, & Affiliates		Pa	yments to Others
	Salaries and fees			\$	🗆	\$	
	Purchase of real estate			\$	_ 🗆	\$	
	Purchase, rental or leasing and installation of	f machinery and equipment		\$	_ 🗆	\$	
	Construction or leasing of plant buildings a Acquisition of other businesses (including t that may be used in exchange for the assets	ne value of securities involved in this offe	ering	\$	_ □	\$	
	merger)	•	_	\$	_ 🗆	\$	
	Repayment of indebtedness			\$	_ 🗆	\$	
	Working capital			\$	_ x	\$	1,940,000.00
	Other (specify):						
				\$		\$	
	Column Totals			\$	_ 🗆	\$	
	Total Payments Listed (column totals added)		x \$	1,940,0	00.00	<u> </u>
		D. FEDERAL SIGNAT	URE				
con	issuer has duly caused this notice to be sign stitutes an undertaking by the issuer to furnishe issuer to any non-accredited investor pure	h to the U.S. Securities and Exchange Co					
Issu	er (Print or Type)	Signature /		ate		•	
Му	Girlfriend's Boyfriend, LLC	1	F	ebruary <u>21</u> , 200	8		
Nan	ne of Signer (Print or Type)	Title of Signer (Print or Type)					
Ric	k McFarland	Manager of Fiftyfilms LLC, LLC	which is the	Manager of My (Girlfrien	d's	Boyfriend

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE							
1.	Is any party described in 17 CFR 230.262 present	ly subject to any of the disqualification provisions	Yes No of such rule? X						
	See A	Appendix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes to furm (17 CFR 239.500) at such times as required by sta	ish to any state administrator of any state in which ate law.	this notice is filed, a notice on Form D						
3.	The undersigned issuer hereby undertakes to furn offerees.	ish to the state administrators, upon written reques	t, information furnished by the issuer to						
4.		is familiar with the conditions that must be satisfien this notice is filed and understands that the issuer as have been satisfied.							
	e issuer has read this notification and knows the cor horized person.	ntents to be true and has duly caused this notice to l	be signed on its behalf by the undersigned duly						
Issı	uer (Print or Type)	Signature	Date						
M	y Girlfriend's Boyfriend, LLC	1 m	February <u>21</u> , 2008						
Naı	ne (Print or Type)	Title (Print or Type)							
Ri	ck McFarland	Manager of Fiftyfilms LLC, w Boyfriend, LLC	Manager of Fiftyfilms LLC, which is the Manager of My Girlfriend's Boyfriend, LLC						

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2		3		5 Disqualification						
	To non-a	to sell accredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)						
	ļ	ļ		Number of Accredited		Number of Non-Accredited					
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No		
AL											
_AK								ļ			
AZ											
_AR											
_CA								<u> </u>			
СО											
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APPENDIX

1		2	3		5 Disqualification						
	To non-	to sell accredited is in State i-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
МТ											
NE											
NV											
NH											
NJ						i					
NM											
NY											
_ NC											
ND											
ОН		·							i		
ок											
OR											
PA											
RI											
sc											
SD											
TN											
TX											
UT	X		Preferred Membership Units \$1,950,000.00	0	\$0.00	1	\$25,000.00		Х		
VT											
VA							-				
WA											
WV			<u> </u>								
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